## State of New Mexico

Submit 3 copies to Appropriate District Office	Energy, Minerals and Natural Resources Department									Form C-103 Revised 1-1-89
DISTRICT I	OIL CONSERVATION DIVISION									
P.O. Box 1980, Hobbs, NM, 88240						UN	WELL API NO.			
DISTRICT II P.O. Box 2088							30-025-32770			
P.O. Box Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088							5. Indicate Type of Lease  STATE   FEE   6. State Oil / Gas Lease No.			
DISTRICT III										
1000 Rio Brazos Rd., Aztec	, NM 87410						6. State Oil / G	as Lease i	1O.	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI (FORM C-101) FOR SUCH PROPOSALS.							7. Lease Name or Unit Agreement Name WEST DOLLARHIDE DRINKARD UNIT			
1. Type of Well: OIL GAS WELL OTHER										
Name of Operator     CHEVRON USA INC							8. Well No. 149			
Address of Operator 15 SMITH RD, MIDLAND, TX 79705							Pool Name or Wildcat     DOLLARHIDE TUBB DRINKARD			
4. Well Location										
Unit Letter	:	<u>165</u> F	eet From The	SOUT	H Line and 165		Feet From 1	he WES	<u>3T</u> L	ine
Section 32		Township				N	иРМ	•	LEA CO	UNTY
		10. Elevation	(Show whether	DF, RKB,	RT,GR, etc.) 31:	26'-GL,	3141'-KB			
11.	Check Ar	propriate B	ox to Indica	ate Nat	ure of Notice, F	Report	. or Other D	ata		
NOTICE OF						•	•		PORT C	ıF.
							UBSEQUENT REPORT OF:  ✓ ALTERING CASING			
		CHANGE PLAN				INIC OD				
TEMPORARILY ABANDON		CHANGE PLAI	45		COMMENCE DRILL			PLUG AI	ND ABANDO	NMEN!
PULL OR ALTER CASING										
OTHER:				U_	OTHER:		RC	D PART	<del></del>	<b>~</b>
<ul> <li>Describe Proposed or (proposed work) SEE R</li> <li>6-02-06: MIRU. BLEED W PART. LATCH ONTO ROI 6-05-06: LD ENTIRE ROI 6-06-06: TIH W/BHA TO 6-07-06: SPACE &amp; HANG</li> </ul>	ULE 1103. /ELL OFF. TOI DS & UNSEAT D STRING DUE 6271. SET TAC	H W/RODS TO PUMP. E TO WEAR. I C W/20,000# T	O PARTED 47	7TH. UN/ /8" TBG. H W/PUN	ABLE TO LATCH (	ONTO F	RODS. LD. CIF			
							25678910	121314 Me	151677 76 151677 76 1510 150 150 150	29 TO 1 22 23 24 25

DATE 6/12/2006

TYPE OR PRINT NAME

**Denise Pinkerton** 

Telephone No.

432-687-7375

**APPROVED** 

CONDITIONS OF APPROVAL, IF ANY:

TITLEOC DISTRICT SUPERVISOR/GENERAL MANAGER

Regulatory Specialist

JUN 1 5 2006

